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EQUAL HOUSING

Housing Choice Voucher Voluntary Withdrawal Form

Date:	
It is my desire to no longer receive rental assistance from Stark Metropolitan Housing	
Authority's Housing Choice Voucher (Section 8) Program effective for:	
(Month)30 th or 31 st 20	
In order to avoid any misconceptions or problems in the future, please document specifically your intentions regarding your desire to withdraw from the program in the space provided below. If you are returning this form by mail, please utilize the address listed above.	
The reason(s) I wish to withdraw from the Housing Choice Voucher rental assistance program is as follows:	
Tenant Signature Date	